

DEVELOPING A CENTER FOR NURSING SCHOLARSHIP AND LEADERSHIP IN KANSAS

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ABSTRACT

Most states in the United States have nursing centers that focus on workforce issues, although some centers focus on nursing research and scholarship. Kansas does not currently have a state-wide center of any type. In recent summits of nurse educators and clinical nurses in Kansas, participants identified the need for a state-wide center for nursing excellence that would support nursing research, scholarship, and the development of nurse leaders. Prior to developing the new center, data from state workforce and other centers of nursing excellence were collected to identify the purpose, mission, organizational structure, and funding mechanisms that have guided development of other centers. Data were collected from the web sites of the 33 established workforce centers and from several additional, institution-based centers. Content analysis was used to identify common themes for the purpose, structure, and funding of centers and these findings. In addition to the summary reports from the state-wide summits of nurse educators and clinical nurses, were used to guide development of a proposed center for Kansas. The Kansas Center for Nursing Scholarship & Leadership will be virtual, independent, and not-for-profit. The Center will have an Advisory Council that will include participants state-wide, from all levels of nursing education, nursing practice, and regulatory partners. Strategies for development, implementation, and evaluation of a state-wide Center for Nursing Scholarship and Leadership are discussed. In addition, strategies for promoting innovative, collaborative projects across educational levels and between schools and clinical partners are suggested.

INTRODUCTION

For the past several years, the professional nursing workforce has experienced a shortage in the number of practicing registered nurses. It is expected to continue for the next decade (American Association of Colleges of Nursing, 2010). This nurse shortage has resulted in questions concerning the education of nurses, preparation of nurse leaders, and evidence-based and best practice implementation. Questions of how to best recruit and retain adequately prepared nurses to care for the ever increasing acuity of patients also have arisen (Cash, Daines, Doyle, & von Tettenborn, 2009). In the United States, attempts at creating and enhancing state nursing workforces have been achieved through nursing centers. Nursing centers have been created with diverse goals, including developing the nursing workforce, and developing and testing strategies to improve patient care, education, research, leadership, and management (Knox & Gharrity, 2004). Existing centers vary with respect to purpose, structure, and funding mechanisms. Some are centered on workforce issues, with goals focused on responding to the nursing shortage, while others focus on improvement of nursing care quality within the state.

Currently, the state of Kansas does not have a nursing center. In two 2009 state-wide summits for nurse educators and clinical nurses, nursing leaders in Kansas identified the need for a Center for Nursing in the state. Concurrently, this need was identified by member schools of the Kansas Association of Colleges of Nursing. In this qualitative study, the literature regarding centers for nursing, partnerships, and nursing workforce was reviewed to identify the purpose, structure, and funding mechanisms of established state-wide nursing centers. These findings were used to guide development of a Kansas Center for Nursing, to complement the goals of the state's nursing professionals and educators that were expressed during the state-wide summits. Through the development of partnerships, the center will help stimulate innovation, support investigation of nursing education and best practices, and spread research of best practices in Kansas.

Research Questions

Two questions helped guide the research methods:

- What are the models of centers for nursing in the United States?
- In guiding center development, what models of nursing centers complement the goals of nurse professionals in Kansas?

Background

Thirty-three states in the United States have an established center focused on the nursing profession within the state. A center for nursing has various purposes that depend on the goals within an organization. Each organization, or in this case state, has different needs and the state nursing center should be designed to fit the state-based needs. A center of nursing provides a foundation for organizing quality, education, research, and values and underpinnings of nursing (Knox & Gharrity, 2004). Most importantly, a center provides a means of displaying nursing and nurses and their practice. Developing a center for nursing involves identifying a method for describing and integrating the practice, education and development, research, and management aspects of nursing. A center for nursing should include four basic components in its structure: 1.) nursing practice, 2.) leadership and management, 3.) education and development, and 4.) research and evaluation (Knox & Gharrity, 2004). Establishing a center for nursing can lead to positive outcomes including improved recruitment and retention statistics, and quality of patient care (Knox & Gharrity, 2004). Using nurses to develop a visible and recognized center for nursing, which has a structure that explains nursing internally and externally and serves as an integrating mechanism, can lead to a center that produces innovation, development, and practice (Knox & Gharrity, 2004).

The group that runs and oversees the center for nursing is a vital part of its development. Structural bodies can include schools, government, nurse professionals, and hospitals. Gersten-Rothenberg (1998) suggests schools of nursing should develop centers for nursing. Schools of nursing have

access to both formal and informal networks. They can also improve patient care and access to health care as well as provide roadways for research, training, and practice. Academically based centers for nursing also contribute to the improvement of scholarship, teaching, and training in schools. Aside from the benefits of nursing schools developing centers for nursing, Gerstan-Rothenberg (1988) also discusses the disadvantages. Unfortunately, school-based centers tend to set goals aimed towards improving the school environment and possibly the community surrounding the school, with the goals benefitting a smaller population, when compared to a state-based center. Another disadvantage for nursing schools is the lack of support. Nursing schools creating centers for nursing are not supported by medical organizations. This is because some nursing centers offer health services using advanced registered nurse practitioners. Medical organizations feel advanced practice nurses cannot provide independent care. Medical organizations feel there is a lack of research supporting quality patient outcomes with care from independently practicing advanced practice nurses. Nursing centers run by nursing schools also receive inconsistent financial support from both state and federal governments.

Before developing a center for nursing, the chances of success and sustainability should also be considered. Boblitz and Thompson (2005) suggest six steps; “forecasting demographic changes in the area, identifying service lines, calculating use rates for service lines, evaluating market trends and market share, conducting a financial review, and formulating a plan” (p.72), in assessing the feasibility of developing centers of excellence. The steps are geared towards hospital-based centers for excellence but a few are equally as valid in discussing development of a center for nursing. Assessing the need for a service, identifying how the service will sustain itself monetarily, and exploring how the service will be carried out are basic elements in development. Identifying nursing services needed in Kansas, conducting a financial review, and creating a plan for development and implementation are most important and are utilized in this study.

The existence of a nurse shortage is well documented. According to Cash, Daines, Doyle, and von Tettenborn (2009) the awareness of the shortage of nurse educators is minimal and that improvement in the work environment could help to attract and retain nurse educators. Factors that affect job satisfaction among nurse educators include stress, leadership and management, empowerment, trust and respect. The authors further suggest that nurse educators contribute to the research of their work environments in order to enhance change (2009). A center for nursing should include; nursing practice, education and development, and research and evaluation (Cash, Daines, Doyle, & von Tettenborn, 2009). A center for nursing in Kansas could aid in joining practicing nurses and nurse educators to work in a project to improve nurse educator work environments.

Several studies have been completed on partnerships in nursing. For example, partnerships between community and practicing nurses, hospitals and practicing nurses, and academic institutions and practicing nurses have been implemented (Cramer, Duncan, Megel, & Pitkin, 2009; MacPhee, 2009; Shiber & D'Lugoff, 2002; Spears, Thornton, & Long, 2008). Partnerships between nursing staff can lead to improved practice techniques, career support, and leadership, and expanded educational capacity, all of which can affirm nursing excellence (Spears et al.). The Johns Hopkins University School of Nursing has used a community partnership faculty practice model with their center for nursing (Shiber & D'Lugoff). One commonly identified concern regarding nursing centers is financial stability. After developing a center with established goals and priorities that met the needs of the organization, Johns Hopkins University School of Nursing established a center for nursing. The center encompassed partnerships with nurses and the surrounding community. The partnerships have resulted in fiscal benefit for the center (Shiber & D'Lugoff).

In an effort to resolve concerns of leaders in Nebraska about the nursing workforce, a Task Force was created in order to develop a nursing campus in a rural community. The Task Force consisted

of nursing educators and community leaders. Their job was to assess the feasibility of creating a nursing campus within the rural community. The team formed a partnership with the University of Nebraska Medical Center College of Nursing. A partnership between the University of Nebraska Medical Center College of Nursing and 19 rural counties resulted in a collaborative and successful attempt at remediating the nursing shortage within the state. There were also financial benefits and improvement in education through building a new nursing school campus (Cramer et al., 2009).

Another documented partnership occurred between an urban community hospital and university-based nurse educators. The stakeholders used a deductive approach to create a logic model.

According to MacPhee (2009), "The logic model process encompasses program planning, implementation, and evaluation...a logic model presents a program's logic or rationale. The model is designed to efficiently communicate the elements of a program that make it work. The elements are typically classified as inputs, processes or activities, outputs, and outcomes" (p. 143). This model guided formation of a practice-academic partnership, which resulted in further partnerships and collaborations including, educational workshops for nurses, affiliate academic appointments for practice educators, improved new graduate to entry-level nurse transition, and nursing research collaborations (MacPhee, 2009).

Understanding the background involved in developing and implementing a center for nursing helps to situate the development of a center for nursing in Kansas. The purpose, structure, and funding of the center must align with the needs of the state as well as the needs of the nursing educators and practice professionals. The implementation of partnerships and projects will assist in meeting such common goals as improved patient care, enhanced nursing practice, additional educational opportunities, research completion and dissemination, and an increased understanding and respect for nurses within the state. (Spears et al., 2008).

RESEARCH DESIGN AND METHODS

Before development of the Kansas Center for Nursing, a literature review was completed and a descriptive examination was conducted on the existing state-wide centers. Using the virtual network of each center, obtained from The Forum of State Nursing Workforce Centers (2009), the purpose, structure, funding, and project development of the 33 established United States centers were identified. While researching the established centers, discovery of eighteen other centers, either hospital or school based, were uncovered. These centers also were examined with regard to purpose, structure, and funding mechanisms. Data were recorded in three tables using Microsoft Excel. The first table consisted of state centers registered with the Forum of State Nursing Workforce Centers database. The second table included centers outside of that database such as hospital-based centers. The last table contained information on school-based centers. Content analysis was used in order to identify the purpose, structure, and funding mechanisms of these centers. The findings were used to inform development of a Kansas Center for Nursing. Reports from nursing summits in Kansas were compared to the center data sets, which guided the development of a purpose, structure, and funding plan for a center.

FINDINGS

Purposes, structures, and funding mechanisms between state-workforce centers, non-workforce centers, and schools varied minimally. Workforce centers focus on how to improve the state's nurse workforce through strategies such as recruitment, retention, and education. Centers outside of workforce development are more focused on research and scholarship. There are 33 state workforce centers identified from The Forum of State Nursing Workforce Centers website. Eleven centers were identified as organization or hospital-based. Seven centers were school-based. Purposes of state nursing centers include workforce development, supporting evidence-based practice, establish research agendas, secure funding for research, and support research, promote

nursing through scholarship and research grants, and develop public awareness, provide scholarships, publish work by nurses, support nursing research, and raise money to fund these projects. Reoccurring themes within purposes are workforce development (n=20), research promotion (n=17), scholarship (n=5), and health promotion (n=9).

Structural components of nursing centers do not always consist of a single structural body. In some centers, an Advisory Board may be dissected into various steering committees; each in charge of handling a function of the center. Structures utilized by state nursing centers include; the State Board of Nursing, State Hospital Association, State Nurses Association, Board of Directors both appointed and volunteer members, Advisory Boards, Governance Councils, Steering Committees, and independent or non-profit organizations. Most commonly, nursing centers are overseen by a board whether a Board of Directors (n=9), Advisory Board (n=4), or committee (n=6). Another common theme included independent, non-profit centers (n=6).

Funding mechanisms, like structures of nursing centers, frequently involve more than one type of support. Funding may be federal, state, contributed from organizations or individuals, hospital-based, partnership associated, or come from foundations and grants. Some centers, the New Mexico Center for Nursing Excellence for example, implement fundraising activities in order to remain financially stable. Grants (n=9), foundations (n=5), partnerships (n=8), contributions (n=10), and state funding (n=7) are common themes in terms of funding state nursing centers. There were minimal differences in structures and funding mechanisms among the three types of nursing centers.

Summit reports from nurse educators and clinical nurses in Kansas helped guide center development. For example, the need for a focus on scholarship in order to promote and support research and evidence-based practice was identified as an important feature for the new center to have. Summit participants expressed concerns regarding the separation between eastern and

western Kansas. Activities implemented on one side of the state may not be known or recognized on the other side of the state. Therefore, a need for research dissemination was identified. In order to develop new nurse leaders in Kansas, a focus on mentorship was suggested. Nurse educators and clinical nurses also expressed a need for independence in regards to the structure of the Kansas Center for Nursing, thus the center will not be overseen by a regulatory group, school, or hospital-based organization.

The Kansas Center for Nursing Scholarship & Leadership

In order to gain feedback from stakeholders, the draft plan and supporting information were presented at the Kansas Organization of Nurse Leaders (KONL) Tri-Council meeting in Salina, Kansas in January 2010. After gaining support from KONL for the proposal, the finalized Center plan was presented during the “Seeking Innovations in Nursing Education” nursing faculty and provider summit in Wichita, Kansas in March 2010. Significant support for the Center plan was expressed during the state-wide summit.

The purpose of the Kansas Center for Nursing Scholarship & Leadership is to advance the development and dissemination of nursing scholarship in Kansas through focused mentorship and broad-based collaboration. Kansas educators and clinical nurse leaders expressed concern regarding a disconnect between the eastern and western sides of Kansas. Research taking place on one side of the state will not always reach the other side. A need for partnership and collaboration was represented in the Center purpose statement.

Upon examination of the background information along with discussion between stakeholders, the center will be an independent, not-for-profit organization. An Advisory Council will be formed with representation from nursing providers as well as all educational program levels including; practical, associate degree, baccalaureate degree, and graduate nursing programs. Also, regulatory board members, including those from the Kansas State Board of Nursing, Kansas State Nursing

Association, Kansas Board of Regents, and Kansas Hospital Association, will serve on the Kansas Center for Nursing Scholarship & Leadership Advisory Council. In order to ensure equal access to the center and its resources to nurses across the state, the center will have a virtual location.

Funding mechanisms will involve initial funding for development of the center including creating a website, and providing funding for nursing scholarship projects. Start-up funds will come from the Robert Wood Johnson Foundation Executive Nurse Fellows program through Alum Fellow, Dr. Cynthia Teel. Grant and Foundation support will be sought for future funding. The Kansas Center will be implemented in the Summer of 2010.

There are remaining steps in progress and short term goals to reach. Members to serve on the Advisory Council need to be identified. A web-presence needs to be created for the Kansas Center. Creating a mechanism for supporting projects through the Center, including developing a call for proposals and a review and award process, still needs to be completed.

DISCUSSION AND CONCLUSION

The set-up and development for the Kansas Center for Nursing Scholarship & Leadership has been researched, reviewed, and agreed upon. Now the process of guiding and implementing the activities of the center must begin. A review of literature identified key concepts and valuable suggestions in developing a center for nursing. Boblitz and Thompson (2005) presented a developmental plan for establishing a center that involved assessing the need for center services, assessing funding mechanisms, and creating a plan for development. The need for a Kansas Center for Nursing Scholarship & Leadership was identified. A planning group was formed and assessment of center purpose and feasibility began. Development of the center incorporated nurse educators, leaders, and clinical nurses. This resulted in suggestions from many areas of the nursing profession. The Center purpose encompasses the goals of these nurse leaders in Kansas, as suggested by Knox and

Gharrity (2004). The goals involve implementation of partnerships between students and educators, clinical nurses and educators, and students and clinical nurses. Partnerships are a vital component in the Center's function and will aid in positive outcomes for the stakeholders involved (Cramer et al., 2009; MacPhee, 2009; Shiber & D'Lugoff, 2002; Spears et al., 2008).

Addressing the state's need for a nursing center and creating a center focused on research, scholarship, and leadership will help to alleviate problems within the nursing workforce in Kansas. Through the Center, nurses in Kansas will disseminate research findings, collaborate, form broad-based partnerships throughout the state, and, ultimately, have another means to investigate and use best care practices to meet the health needs of Kansans.

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